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## BIB DATA SHEET

CONFIRMATION NO. 3564

|  |   |  |                                 |  |                          |                                |
|--|---|--|---------------------------------|--|--------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/802,225   | <b>FILING or 371(c)<br/>DATE</b><br>03/16/2004<br><b>RULE</b>   | <b>CLASS</b><br>606                                      | <b>GROUP ART UNIT</b><br>1732   | <b>ATTORNEY DOCKET NO.</b><br>ACSC 68062<br>(2242XXD)        |                          |                                |
| <b>APPLICANTS</b><br>Florencia Lim, Union City, CA;<br>Nianjong Bei, Mountain View, CA;<br>Chi Le Long, San Jose, CA;  |   |  |                                 |  |                          |                                |
| <b>** CONTINUING DATA *****</b><br>This application is a DIV of 09/733,120 12/08/2000 ABN<br>which is a CIP of 09/295,694 04/21/1999 PAT 6,488,688<br>which is a CIP of 09/063,969 04/21/1998 PAT 6,287,314  |   |  |                                 |  |                          |                                |
| <b>** FOREIGN APPLICATIONS *****</b> N/A JCS   |   |  |                                 |  |                          |                                |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>06/03/2004   |   |  |                                 |  |                          |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <i>James Sanders</i><br>Examiner's Signature |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>CA   | <b>SHEETS DRAWINGS</b><br>3                                  | <b>TOTAL CLAIMS</b><br>4 | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>FULWIDER PATTON LLP<br>HOWARD HUGHES CENTER<br>6060 CENTER DRIVE, TENTH FLOOR<br>LOS ANGELES, CA 90045<br>UNITED STATES  |   |  |                                 |  |                          |                                |
| <b>TITLE</b><br>Balloon catheter   |   |  |                                 |  |                          |                                |
| <b>FILING FEE RECEIVED</b><br>770  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                 | <input type="checkbox"/> All Fees                            |                          |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.16 Fees (Filing)                  |                          |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                          |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.18 Fees (Issue)                   |                          |                                |
|  |   |  |                                 | <input type="checkbox"/> Other _____                         |                          |                                |
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